PTO/SB/01 (10-00)

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**DECLARATION FOR UTILITY OR DESIGN** PATENT APPLICATION (37 CFR 1.63)

 □ Declaration Submitted With Initial Filing

□ Declaration OR Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

As a below named inventor, I hereby declare that:

Attorney Docket Num	nber GG119.3US			
First Named Inventor	Carl Risinger			
cc	MPLETE IF KNOWN			
Application Number	Unassigned			
Filing Date	August 30, 2001			
Group Art Unit	Unassigned			
Examiner Name	Unassigned			

## EK748827364US

My residence, post office address, and citizenship are as stated below next to my name.						
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled						
DETECTION OF CYP3A4 AND CYP2C9 POLYMORPHISMS						
the specification of which (Title of the Invention)						
☑ is attached hereto						
OR						
☐ was filed on (MM/DD	MYYY)	as United States Ap	plication Number o	r PCT Internation	al	
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).					
I hereby state that I have revie specifically referred to above.	wed and understand the conte	ents of the above identified sp	ecification, includin	g the claims as ar	nended	
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.						
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority	Certified Copy Attached?		
Number(s)	Country	(MM/DD/YYYY) Country	Not Claimed	YES	NO	
0021286.0	GB	08/30/2000			$\boxtimes$	
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:						
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.						
ApplicationNumber(s	· ·	MM/DD/YYYY)				
			numbers ar a suppleme	orovisional appli re listed on ental priority data B attached here	a sheet	

[Page 1 of 3]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to:		tomer Number Bar Code Label		28996	OR		Correspondance address below
Name				,			
Address				· · · · · · · · · · · · · · · · · · ·			
Address							
City		. 1971.11		State		ZIP	
Country	1	<b>Felephone</b>				617-	<b>Fax</b> 964-7974
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
NAME OF SOLE OR FIRST INVENTOR:   A petition has been filed for this unsigned inventor							
Given Family Name Risinger or Sumame							
Inventor's Signature						D	ate
Residence: City	lence: City State		Co	Country		Citizenship	
Uppsala			Sv	Sweden		Swedish	
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				A petition has bee	n filed for t	his ı	unsigned inventor
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Inventor's Signature			Da	te			
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Mailing Address Backvagen 14							
Mailing Address							
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Uppsala	3.2.0		1	-756-52	ľ		eden
Additional inventors are being named on the one supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

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## **DECLARATION**

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 3 of 3

Name of Additional Joint Inventor, if any:			☐ A petition has been filed for this unsigned inventor			
Given	Name (first and middle	e [if any])	Family Name or Surname			
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Inventor's Signature				Date		
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Mailing Address	Rosenvägen 6					
Mailing Address	Same as above					
City Uppsala		State ZIF	SE-756-52	Sweden Country		
Name of Additional Jo	oint Inventor, if any:		A petition has been filed	for this unsigned inventor		
Given Name (first and middle [if any])			mily Name or Surname			
Erik		(	Olaisson			
Inventor's Signature				Date		
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Name of Additional Joint Inventor, if any:						
Given Name (first and middle [if any])		[if any])	Family Name or Surname			
Inventor's Signature				Date		
Residence: City		State Co	untry	Citizenship		
Mailing Address						
Mailing Address						
City		State	Zip	Country		

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